

PART B - FEE(S) TRANSMITTAL

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7590

11/18/2004

Siemens Corporation
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Sandra J. Steunenbergh (Depositor's name)
Sandra J. Steunenbergh (Signature)
February 17, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/734,821	12/13/2003	James C. Bellows	2003P13762US	2215

TITLE OF INVENTION: CONDENSATE POLISHER WITH DEEP CATION BED AND POWDERED RESIN BED

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$300	\$1670	02/18/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
CINTINS, IVARS C	1724	210-284000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Siemens Westinghouse Power Corporation, Orlando, FL (US)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies _____

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form FTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-2179 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Terrance M. Brennan
Typed or printed name Terrance M. Brennan

Date February 17, 2005

Registration No. 42,360

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TO: Mail Stop Issue Fee
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FROM: Sandy Steunenbergh, IP Legal Asst.
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Fax No.: 703-746-4000

Fax No: 407-736-6440
Phone: 407-736-2472

DATE: February 17, 2005

Number of Pages including cover page: 3

Re: 10/734,821 filing date: 12/13/2003
Attorney Docket No.: 2003P13762US
Issue Fee Date Due: 02/18/2005
Paper Dated: 02/17/2005
The required fees have been authorized to be charged to Deposit Account 19-2179.

Certification of Transmission under 37 CFR 1.8

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Facsimile Cover Sheet (1 pg.)

PTOL-85 PART B-FEE(S) TRANSMITTAL (2 pgs., original + 1 copy)


Sandra J. Steunenbergh

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